

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adrian Smith for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 1711 Frontage Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2013

City	State	Zip Code
Scottsbluff	NE	69361-2780

Amount of Each Disbursement this Period

160.49

Purpose of Disbursement
Office Supplies

001

Transaction ID : B-S-12976

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Citi Cards(04/05/13)

State: District:

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address 2809 Avenue B

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2013

City	State	Zip Code
Scottsbluff	NE	69361-4370

Amount of Each Disbursement this Period

187.97

Purpose of Disbursement
Campaign Cell Bill

001

Transaction ID : B-S-12977

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Citi Cards(04/05/13)

State: District:

Full Name (Last, First, Middle Initial)

C. Ruthschris Steak House

Mailing Address 724 9th Street NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2013

City	State	Zip Code
Washington	DC	20001-4505

Amount of Each Disbursement this Period

1913.76

Purpose of Disbursement
Campaign Event Locations & Foo

007

Transaction ID : B-S-12959

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Citi Cards(04/05/13)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
